

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION		FEC IDENTIFICATION NUMBER ▼ C C00487470	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 10 / 2017	
Mailing Address 2001 L St., NW Ste. 600		Amount 5.71	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4285
Purpose of Expenditure internet communications (from advance line 21)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 10 / 2017
Name of Federal Candidate HANDEL, KAREN CHRISTINE, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		299250.24	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input checked="" type="checkbox"/> Other (specify) ▶ Special-General

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 10 / 2017	
Mailing Address 2001 L St., NW Ste. 600		Amount 5.71	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4286
Purpose of Expenditure internet communications (from advance line 21)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 10 / 2017
Name of Federal Candidate MOODY, DAN, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		299255.95	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input checked="" type="checkbox"/> Other (specify) ▶ Special-General

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11.42
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Rozansky, Adam, ,

[Electronically Filed]

Date

 MM / DD / YYYY
04 / 11 / 2017

Signature

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00487470 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report	<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 11 / 2017</div> </div>	
Mailing Address 2001 L St., NW Ste. 600		Amount <div> <div>240.79</div> </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4289 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 11 / 2017</div> </div>
Purpose of Expenditure tv ad production costs (from advance line 21)		Category/ Type	
Name of Federal Candidate HANDEL, KAREN CHRISTINE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>06</u> State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>599471.74</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input checked="" type="checkbox"/> Other (specify) ► Special-General

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 11 / 2017	
Mailing Address 2001 L St., NW Ste. 600		Amount 240.79	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4290 Date of Disbursement or Obligation MM / DD / YYYY 04 / 11 / 2017
Purpose of Expenditure tv ad production costs (from advance line 21)		Category/ Type	
Name of Federal Candidate MOODY, DAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought		599712.53	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Special-General

(a) SUBTOTAL of Itemized Independent Expenditures.....		481.58
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures.....		

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

[Electronically Filed]

Signature

Date _____

MM / DD / YYYY

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

PAGE	3	OF	3
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION		FEC IDENTIFICATION NUMBER ▼ C C00487470							
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y			
M M M	D D D	Y Y Y Y Y Y							

Full Name of Payee Powertrain Media		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>11</td> <td>2017</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y	04	11	2017
M M M	D D D	Y Y Y Y Y Y							
04	11	2017							
Mailing Address PO Box 1051		Amount <table border="1"> <tr> <td colspan="3">149987.50</td> </tr> </table>		149987.50					
149987.50									
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.4287						
Purpose of Expenditure tv ad air buy, production costs	Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>10</td> <td>2017</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y	04	10	2017
M M M	D D D	Y Y Y Y Y Y							
04	10	2017							
Name of Federal Candidate HANDEL, KAREN CHRISTINE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA						
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Special-General							

Full Name of Payee Powertrain Media		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>11</td> <td>2017</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y	04	11	2017
M M M	D D D	Y Y Y Y Y Y							
04	11	2017							
Mailing Address PO Box 1051		Amount <table border="1"> <tr> <td colspan="3">149987.50</td> </tr> </table>		149987.50					
149987.50									
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.4288						
Purpose of Expenditure tv ad air buy, production costs	Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>10</td> <td>2017</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y	04	10	2017
M M M	D D D	Y Y Y Y Y Y							
04	10	2017							
Name of Federal Candidate MOODY, DAN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA						
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Special-General							

(a) SUBTOTAL of Itemized Independent Expenditures.....	299975.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	300468.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Rozansky, Adam, , ,

[Electronically Filed]

Date

M M M	D D D	Y Y Y Y Y Y
04	11	2017

Signature